

## CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

10 MAY 10 AM 9: 13

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE

D139120

	STAIL OF IDA IO
1. The assumed business name which the undersign	gned use(s) in the transaction of
business is: Kanlify Tree Marden	Name
2. The true name(s) and business address(es) of the business under the assumed business name:	he entity or individual(s) doing
Glenna Garrison G	Complete Address Lenna Garrison
Bon	30838 Mwy 95 new terry 210 83805
3. The general type of business transacted under t	he assumed business name is:
Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  Family Tree Maiden Name 530838 Hwy 95 Bonners Ferry M83805  5. Name and address for this acknowledgment copy is (if other than # 4 above):	Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301
	Secretary of State use only
signature: Transfunction	
rinted Name: Glenna Garri Son  capacity/Title: OWNER	IDANO SECRETARY OF STATE
Capacity/Title: OWN ex	CK: 3727 CT: 158818 BH: 1221486 1 8 25.88 = 25.88 ASSUM NAME # 2
(see instruction # 8 on back of form)	<b>* * ***</b>